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IN THE COURT OF APPEAL OF THE STATE OF CALIFORNIA

SECOND APPELLATE DISTRICT

DIVISION FIVE

In re A.G. et al., Persons Coming
Under the Juvenile Court Law.

B291776

(Los Angeles County
Super. Ct. No. 18CCJP02007)

LOS ANGELES COUNTY
DEPARTMENT OF CHILDREN
AND FAMILY SERVICES,

Plaintiff and Respondent,

v.

S.G.,

Defendant and Appellant.

APPEAL from orders of the Superior Court of Los Angeles
County, Martha Matthews, Judge. Affirmed.

Megan Turkat Schirn, under appointment by the Court of
Appeal, for Defendant and Appellant.

Office of the County Counsel, Mary C. Wickham, County
Counsel, Kristine P. Miles, Assistant County Counsel, and

Jessica S. Mitchell, Deputy County Counsel, for Plaintiff and
Respondent.

The juvenile court asserted dependency jurisdiction over infant A.G. and her older sister S.A. We consider whether— notwithstanding S.G.’s (Mother’s) no contest plea to the amended dependency petition—she can obtain reversal of the jurisdiction determination by attacking an on-the-record statement the court made that was unnecessary to its decision. We also decide whether substantial evidence supports the disposition order entered by the juvenile court.

I. BACKGROUND

A. *A.G.’s Hospitalization*

On February 22, 2018, at approximately 6:10 a.m., Mother dropped A.G. off with a longtime and trusted friend, who, for more than a month, had been babysitting A.G. six days a week (Babysitter). At the time, A.G. was six months old. Babysitter’s husband returned home for lunch at approximately 1:00 p.m. and he called 911 after A.G. was not responsive and having seizures.

Paramedics transported A.G. to the hospital, where she was “found to be actively having seizures and was minimally responsive.” The hospital’s pediatric intensive care unit determined A.G. was suffering from a right skull fracture, extensive intracranial bleeding and bruising in the brain, global neurologic injury from a lack of oxygen to the brain, and retinal hemorrhages.

Doctors treating A.G. consulted with Dr. Anastasia Feifer (Dr. Feifer), a board-certified child abuse expert. Based on her review of A.G.’s medical records, including magnetic resonance imaging (MRI) and computerized tomography scans, Dr. Feifer diagnosed A.G. with “abusive head trauma.” In a consultation note, Dr. Feifer opined A.G.’s head injuries resulted “from a

shaking mechanism OR from a rotational force which resulted in the head coming to an abrupt stop against a surface.” Dr. Feifer also discovered evidence of what might have been an older hemorrhage in A.G.’s brain. After consulting with colleagues in neuroradiology, Dr. Feifer determined the brain bleeds visible on the MRI scan were “*sub-acute*, meaning that they could be between . . . two days to a couple of weeks old at the time that the MRI was completed.” However, “given the fast clinical decompensation of the baby’s health,” Dr. Feifer concluded “it is most likely that the injuries were sustained close to the time of [A.G.’s] hospitalization.”

B. Initial Statements Made by Mother and Babysitter

On the same day A.G. was hospitalized, a social worker from the Los Angeles County Department of Children and Family Services (the Department) interviewed Mother. Mother denied knowing how A.G. sustained her injuries. According to Mother, A.G. displayed normal behavior days before and early in the morning on the day of her hospitalization. Mother did admit, however, that A.G. had sustained bruising to her legs several weeks earlier when her five-year-old sister pressed too hard on A.G. while she was in a bouncer. Mother also revealed that approximately two and half weeks prior to A.G.’s hospitalization, Babysitter had shown Mother a photograph and videos of various injuries to A.G., including a bump on the right rear of A.G.’s head. Although Babysitter encouraged Mother to take A.G. to the doctor at that time, Mother declined; Mother told the social worker she did not seek medical treatment for A.G. because she believed the infant did not exhibit any pain symptoms when she

(Mother) examined her.¹ Mother further stated that just a few days before A.G.'s hospitalization she had observed tenderness when touching A.G.'s head; Mother said she was planning to take A.G. to the doctor but A.G.'s hospitalization occurred before she acted on that plan.

Mother initially denied she allowed anyone other than Babysitter and her relatives access to her daughters. However, in a follow-up interview the next day, Mother admitted her current boyfriend had spent at least two nights at her home with her and her children since their relationship became serious in January 2018. Mother further admitted she had been cheating on her current boyfriend with her ex-boyfriend, and he stayed overnight at her home immediately preceding A.G.'s hospitalization (February 20 and 21).

A Department social worker interviewed Babysitter the day after A.G. was admitted to the hospital. Like Mother, Babysitter denied any knowledge of how A.G. sustained her most recent serious injuries. Babysitter stated A.G. did not show any signs of distress or discomfort when Mother dropped her off; according to Babysitter, A.G. was "awake, fully mobile, and cheerful" when Mother left her in Babysitter's care. Throughout the morning, A.G. displayed "normal behavior," eating and napping as usual. At approximately 12:30 p.m., after preparing lunch while A.G. was sleeping, Babysitter picked up A.G., who appeared limp and lifeless, like a "rag[]doll."

The Department also interviewed Babysitter's husband. He said that when he arrived home shortly after 1:00 p.m., A.G.

¹ Babysitter said that when she asked Mother how A.G. had been injured, Mother said, "I don't know. Ask [S.A.] about it."

was lying on the living room sofa, his own infant son was in a bouncer, and his wife was seated on the floor and appeared “confused.” Babysitter’s husband called 911 after he gently touched A.G. and her eyes rolled back into her head.²

C. The Dependency Petition

In March 2018, the Department filed a petition against Mother alleging A.G. and S.A. were subject to the dependency jurisdiction of the juvenile court. The multiple counts in the petition variously alleged: the children had suffered, or there was a substantial risk they would suffer, serious physical harm inflicted non-accidentally by Mother (Welf. & Inst. Code,³ § 300, subd. (a)); the children had suffered, or there was a substantial risk they would suffer, serious physical harm from Mother’s failure or inability to protect them and her willful or negligent failure to seek medical treatment for them (§ 300, subd. (b)); A.G. had suffered severe physical abuse and Mother knew or reasonably should have known that A.G. was being physically abused (§ 300, subd. (e)); and the physical harm suffered by A.G. created a substantial risk S.A. would be abused or neglected (§ 300, subd. (j)).

In addition to filing a dependency petition against Mother based partly on A.G.’s grave head injuries, the Department also filed a separate dependency petition against Babysitter alleging

² Babysitter’s husband told an investigating police detective that before he placed the 911 call, Babysitter said, “Don’t call. I don’t want to go to jail.”

³ Undesignated statutory references are to the Welfare and Institutions Code.

her child was at substantial risk of suffering serious physical harm because there was evidence A.G. might have suffered her injuries while in Babysitter's care. (As we discuss, *post*, the dependency allegations against Mother and Babysitter were later resolved at a single consolidated hearing given the overlapping evidence.⁴)

D. The Department's Post-Petition Investigation

In advance of the adjudication hearing, a Department dependency investigator re-interviewed Babysitter and her husband. Babysitter's statement differed in certain respects from the one she initially related. Most significantly, Babysitter told the investigator that on the morning of A.G.'s hospitalization, A.G. was either asleep or listless (not eating and "just mov[ing] her head slowly from side to side") from the time Mother dropped her off. Babysitter explained that her husband was the one to call 911 because she "went into a state of shock" after she found A.G. limp and nonresponsive. Babysitter's husband told the investigator that A.G. was asleep when he went to work at 7:30 a.m. and that when he returned home for lunch his wife told him that A.G. had "slept a lot" during the morning.

In addition to these follow-up interviews, the Department obtained information concerning polygraph examinations of Mother and Babysitter.⁵ The polygraph examiner opined

⁴ The dependency petition involving Babysitter's child is not at issue in this appeal.

⁵ The court would later exclude from evidence the polygraph examiner's interpretation of the examination results, which we

Mother's polygraph examination was "inconclusive." In an interview after the polygraph examination, Mother continued to deny causing A.G.'s injuries. The polygraph examiner opined Babysitter's polygraph examination indicated deception. In her post-examination interview, Babysitter told the examiner that when she received A.G. from Mother the child was "not awake," and in a "deep slumber." Babysitter further stated that throughout the morning she tried unsuccessfully to wake A.G., but she would not open her eyes or eat.

Based partly on Babysitter's polygraph examination results and her inconsistent statements, the Department took the position that A.G.'s head injuries occurred "while she was under the care of her babysitter and not her mother." However, the Department expressed concern regarding Mother's prior failure to obtain medical care for A.G. when she suffered leg bruises and swelling on her head. The Department believed that if Mother had sought medical attention for A.G. prior to her hospitalization, the child might never have suffered the severe head injuries she subsequently sustained.

E. The Evidence at a Consolidated Jurisdiction Hearing

Over the course of three days, the juvenile court held a jurisdiction hearing to consider both the dependency petition concerning Mother's daughters and the dependency petition concerning Babysitter's own son. The question of how A.G. sustained her serious head injuries—particularly *when* she sustained the injuries—would affect the resolution of both of the

recount here merely to provide context for post-examination statements made by Mother and Babysitter.

dependency petitions, especially the petition against Babysitter. In an effort to resolve this issue, the parties presented medical expert evidence.

1. Dr. Carol Berkowitz

The Department's expert was Dr. Carol Berkowitz, a physician board-certified in pediatric child abuse and pediatric emergency medicine. In Dr. Berkowitz's opinion, A.G.'s hospitalization was necessitated not by a "fall to the floor," but by an impact "so severe that it led to a lot of bleeding on both sides in the front and then additional bleeding in the back" of her brain. Dr. Berkowitz further testified she agreed with the conclusion reached by A.G.'s consulting doctor, Dr. Feifer, namely, that A.G.'s injuries were sustained close to the time of her hospitalization. More specifically, Dr. Berkowitz estimated that A.G.'s injuries were sustained within one to three hours from the time she arrived in the emergency room.

Dr. Berkowitz acknowledged the medical imaging tests did indicate A.G. had suffered a prior head injury. But she dismissed the possibility that the prior injury is what caused A.G.'s hospitalization because she believed the skull fracture was a new injury. Dr. Berkowitz expressly ruled out any possibility that a bump on A.G.'s head a couple of weeks before her hospitalization caused the bleeding that the imaging tests revealed inside her skull. When the juvenile court asked Dr. Berkowitz if her opinion would change if it appeared that A.G. was asleep from 6:00 a.m. until 911 was called, she testified that it would not; according to

Dr. Berkowitz, such a scenario was “not credible” because A.G.’s seizures were “precipitous.”⁶

2. *Dr. Charles Niesen*

Babysitter called Dr. Charles Niesen, a board-certified child neurologist, to testify as her medical expert. Although Dr. Niesen agreed with Dr. Berkowitz’s interpretation of the imaging studies, which showed that there was bleeding in multiple areas of A.G.’s brain, Dr. Niesen disagreed with Dr. Berkowitz’s conclusion that there was an acute event that took place one to three hours prior to A.G.’s hospitalization. According to Dr. Niesen, “it takes time for that bleeding to spread over the brain. Not minutes, not hours, maybe several hours. Maybe a day or more. . . . You can’t have an impact and an hour or two later . . . have blood all over the brain”

In further contrast to Dr. Berkowitz, Dr. Niesen opined that A.G. could have been “quiet and unresponsive [for] many hours and then [gone] into acute distress” after reaching a “tipping point.” Although Dr. Niesen believed that the causal traumatic event occurred “a day or two” before A.G.’s hospitalization, he was willing to concede it was possible that such an event could have occurred less than six hours before.⁷

⁶ Dr. Berkowitz’s testimony mirrored opinions she had expressed in a June 27, 2018, letter that was received in evidence. In that letter, Dr. Berkowitz concluded: “Based on the current literature . . . I believe that [A.G.] was injured during her time in the care of [Babysitter], . . . , and probably within several hours at the most, from the time of her arrival” at the hospital.

⁷ Dr. Niesen’s testimony was consistent with a letter he wrote dated July 10, 2018, which the court likewise admitted in

3. *Dr. Thomas Grogan*

Mother's medical expert at the hearing was Dr. Thomas Grogan, a pediatric orthopedic surgeon who had been treating and evaluating head injuries to small children since 1985. Dr. Grogan agreed with Dr. Berkowitz's opinion and disagreed with the conclusions reached by Dr. Niesen. In Dr. Grogan's experience, prolonged seizure activity of the kind that A.G. suffered "usually is accompanied fairly closely in time with head injury, . . . , which tends to cause the dysfunction or short circuiting of the brain[—]causing seizures." Dr. Grogan estimated the injury that necessitated A.G.'s hospitalization occurred "within minutes and at most an hour or two prior to the onset of th[e] seizures." In forming his opinion, Dr. Grogan relied on medical journal articles and consulted with a board-certified pediatric neurologist, Dr. Perry Lubens (who likewise believed A.G. suffered a "severe acute traumatic brain injury" that "[m]ost likely . . . occurred within a few hours" of her hospitalization).⁸

evidence. In that letter, Dr. Niesen stated "[s]eizures caused by intracranial bleeds do not always occur at the moment of the bleeding. A necessary volume and zone of irritability needs to be established for the seizures to occur." Elaborating, he wrote that the blood visible on A.G.'s imaging tests "clearly suggests that the evident bleeding occurred many hours[,] if not days [earlier]. . . . [¶] . . . [¶] Therefore, historical information and neuro-imaging do not support a timing of the injury on February 22 but rather an injury that occurred many days before."

⁸ Dr. Grogan's testimony conformed to his July 18, 2018, letter opining: "[I]t is highly probable, given the fact [A.G.] was dropped off by [Mother] at 6:10 AM and ultimately EMS was called at 1 o'clock in the afternoon, that the injuries occurred during that time period and did not predate the time of [Mother]

4. *Babysitter*

In addition to the medical experts, Babysitter also testified at the hearing (Mother did not). Babysitter authenticated text message exchanges with Mother in which Babysitter sent Mother photos identifying the head bump and other body bruises A.G. had sustained before the grave injuries that landed her in the hospital. In text message responses, Mother claimed to be unaware of the injuries and what caused them.

F. Mother Pleads No Contest to an Amended Petition Focusing on A.G.'s Prior Injuries, Not Those That Led to Her Hospitalization

Prior to hearing the parties' closing arguments, Mother's attorney advised the court that Mother and the Department had reached an agreement: in exchange for certain amendments to the petition, Mother would change her plea to no contest. In the proposed amended petition, the non-accidental injury and severe physical injury counts (those alleged pursuant to section 300, subdivisions (a) and (e)) were to be stricken and the remaining counts (those alleged pursuant to section 300, subdivisions (b) and (j)) were to be amended to delete allegations that Mother's actions were deliberate or unreasonable. As so amended, the petition alleged Mother had no explanation for the severe injuries that caused A.G.'s hospitalization but dependency jurisdiction over both of Mother's daughters was appropriate regardless due to A.G.'s prior head injury and bruising that "would not

dropping the child off at 6:10 AM. It is highly unlikely that the injuries were inflicted prior to 6:10 AM." The trial court admitted Dr. Grogan's letter into evidence.

ordinarily occur, except as the result of neglectful acts by [Mother]” and for which Mother “failed to obtain timely necessary medical treatment.”

The juvenile court questioned Mother on the record to ensure she understood the nature and consequences of her written waiver of the right to contest the truth of the dependency petition as amended. Mother confirmed she understood she was giving up her right to argue the petition against her should be dismissed, and the court approved her execution of the waiver and no contest plea.

G. The Remainder of the Consolidated Jurisdiction Hearing and the Subsequent Disposition Hearing for Mother

Although Mother pled no contest to the petition as amended, the petition against Babysitter was still before the juvenile court and required adjudication. The juvenile court permitted counsel for all parties to argue, notwithstanding Mother’s waiver of rights and no contest plea, because the cases were consolidated for hearing and the court was “not going to und[o] that now.” But the court stated counsel for Mother would only be permitted “to argue about either adjudicatory issues—which . . . the court could, despite the waiver, sustain something different from what your client agreed to—and dispositional issues in your client’s case.” But the court was adamant that counsel for Mother would not be permitted to “argue about the petition in the other case [i.e., the petition against Babysitter].”

After hearing argument from the parties, the juvenile court believed *someone* had deliberately injured A.G. But the court concluded it could not sustain a count alleging Mother or

Babysitter caused deliberate injury to the child because it was “simply impossible to determine who actually deliberately injured [A.G.]” The court reasoned, however, that it did not need to make such a finding to assert dependency jurisdiction over the children of both parents in light of the uncontested amended allegations against Mother and the petition against Babysitter that included dependency counts that were not predicated on infliction of non-accidental injury.

In explaining its ruling, the court acknowledged Babysitter had “changed her story several times” and the court believed the “most likely version” of Babysitter’s story was “the last one. . . . [in which] she characterized the child as being asleep or unresponsive the entire morning.” This version of Babysitter’s story, the court asserted, corresponded with the testimony of the medical experts, all of whom the court found “well qualified and credible.” In particular, the court cited Dr. Niesen’s opinion that the injuries could have occurred prior to Mother dropping the baby off with Babysitter and the court observed “none of th[e] other experts] testified that it was impossible that the injuries could have occurred prior” to that time. The court concluded its explanation with the following: “This court fortunately is not a criminal court. I can’t—if I were faced with figuring out what happened beyond a reasonable doubt, I would not be able to do so. [¶] I do think, however, by a preponderance of the evidence that it is more likely that the injury was caused either by [Mother] or by some other person in that household, than that the injury was caused by [Babysitter] between 6:00 a.m. and noon. [¶] So that is the interpretation of the evidence that is the basis for my sustaining the petition. You will note that I am not sustaining a count regarding deliberate injury by either of the two mothers

simply because the evidence is so ambiguous. [¶] However, I think at the very least, the parents in both of these related cases were neglectful and their neglect had tragic consequences.”

At a later disposition hearing (held for Mother separately), the juvenile court ordered A.G. and S.A. removed from Mother’s custody. The court, among other things, ordered A.G. to a suitable medical placement unit, family reunification services for Mother with monitored visits with A.G., and training for Mother at the Braille Institute for A.G.’s ongoing care. With regard to S.A., the court placed her in her father’s custody with two unmonitored, six-hour visits per month for Mother.

II. DISCUSSION

Mother does not challenge the juvenile court findings that actually serve as the basis on which the court asserted jurisdiction over her daughters, namely, the allegations of neglect and failure to protect in the amended petition that the court sustained as a result of Mother’s no contest plea. Rather, Mother devotes page after page in her briefing to attacking the court’s finding (if indeed it is a finding, as opposed to a mere observation or explanatory remark) that it was more likely than not that A.G. suffered her grave head injuries before being dropped off at Babysitter’s home in the morning. Mother further argues we should reverse the juvenile court’s disposition order removing A.G. and S.A. from her custody because, she contends, the order is “based upon the juvenile court’s erroneous conclusion that [A.G.] was injured prior to being placed in [Babysitter’s] care.”

The misdirected attacks on the juvenile court’s orders are, of course, meritless. Mother’s no contest plea prevents her from challenging the jurisdiction findings on appeal, and the record—

including the uncontested findings of neglect that actually do serve as the basis for dependency jurisdiction—discloses adequate support for the associated disposition order.

A. Mother’s No Contest Plea Bars Her from Claiming the Juvenile Court Erred in Assuming Jurisdiction over Her Children

The juvenile court asserted jurisdiction over A.G. and S.A. under section 300, subdivisions (b) and (j). Under the former subdivision (which is one of the possible predicates for jurisdiction over a child’s sibling under subdivision (j)), there must be evidence to permit the juvenile court to find a child “has suffered, or there is a substantial risk that the child will suffer, serious physical harm or illness, as a result of [1] the failure or inability of his or her parent or guardian to adequately supervise or protect the child, . . . [2] the willful or negligent failure of the child’s parent or guardian to adequately supervise or protect the child from the conduct of the custodian with whom the child has been left, or [3] by the willful or negligent failure of the parent or guardian to provide the child with adequate food, clothing, shelter, or medical treatment”

The California Rules of Court provide that a parent at a jurisdiction hearing may elect to (1) admit the petition’s allegations, (2) plead no contest, or (3) submit the jurisdictional determination to the court based on the information provided to the court and waive further jurisdictional hearing. (Cal. Rules of Court, rule 5.682(d).) A parent’s admission, no contest plea, or submission must be made knowingly. (Cal. Rules of Court, rule 5.682(e).) In this case, after questioning Mother, the juvenile court found she knowingly pled no contest and waived her right

to dispute the truth of the jurisdictional allegations in the amended petition. Mother does not contend otherwise.

“A plea of ‘no contest’ to allegations under section 300 at a jurisdiction hearing admits all matters essential to the court’s jurisdiction over the minor.” (*In re Troy Z.* (1992) 3 Cal.4th 1170, 1181.) Thus, it is well settled that “[a]n admission that the allegations of a section 300 petition are true, as well as a plea of no contest to a section 300 petition, bars the parent from bringing an appeal to challenge the sufficiency of the evidence supporting the jurisdictional allegations.” (*In re N.M.* (2011) 197 Cal.App.4th 159, 167 (*N.M.*); accord, *Gabrielle A. v. County of Orange* (2017) 10 Cal.App.5th 1268, 1284; *In re Andrew A.* (2010) 183 Cal.App.4th 1518, 1526 [“It is well settled that a party who enters a no contest plea to a section 300 petition is barred from bringing an appeal to challenge the sufficiency of the evidence supporting the jurisdictional allegations, as the party has already admitted all matters essential to the court’s jurisdiction”].)

Under these settled appellate principles, Mother’s challenge to the juvenile court’s decision to assume jurisdiction over A.G. and S.A. is foreclosed by her no contest plea. Furthermore, even if it were not, Mother does not attack the findings that actually support the court’s decision. Rather, she challenges what strikes us as more of a rumination (but which she labels a finding) that does not serve as the basis for the court’s decision to assume jurisdiction over A.G. and S.A. That sort of challenge obviously does not warrant reversal. (See *In re I.J.* (2013) 56 Cal.4th 766, 773 [“When a dependency petition alleges multiple grounds for its assertion that a minor comes within the dependency court’s jurisdiction, a reviewing court can affirm the juvenile court’s finding of jurisdiction over the minor if

any one of the statutory bases for jurisdiction that are enumerated in the petition is supported by substantial evidence. In such a case, the reviewing court need not consider whether any or all of the other alleged statutory grounds for jurisdiction are supported by the evidence”].)

*B. Substantial Evidence Supports the Disposition Order*⁹

A child may not be removed from a parent or guardian with whom the child resides at the time the petition was initiated unless there is clear and convincing evidence of a substantial danger to the physical health, safety, protection, or physical or emotional well-being of the child and there are no reasonable means to protect the child other than by removing the child from his or her parent’s custody. (§ 361, subd. (c)(1); *In re R.V.* (2012) 208 Cal.App.4th 837, 849.)

“A removal order is proper if based on proof of parental inability to provide proper care for the child and proof of a potential detriment to the child if he or she remains with the parent. [Citation.] ‘The parent need not be dangerous and the minor need not have been actually harmed before removal is appropriate. The focus of the statute is on averting harm to the child.’ [Citation.]” (*N.M., supra*, 197 Cal.App.4th at pp. 169-170.) A juvenile court’s jurisdictional findings are “prima facie

⁹ Although Mother may believe all facets of the juvenile court’s disposition order are equally unsupported, her argument refers to the aspect of the order removing her daughters from her custody. Our discussion is accordingly focused on that feature of the order.

evidence” the child cannot safely remain in the home. (§ 361, subd. (c)(1); *In re T.V.* (2013) 217 Cal.App.4th 126, 135.)

We review the court’s disposition findings for substantial evidence. (*N.M.*, *supra*, 197 Cal.App.4th at p. 170.) “In considering a claim of insufficient evidence . . . , we review the evidence most favorably to the court’s order—drawing every reasonable inference and resolving all conflicts in favor of the prevailing party—to determine if it is supported by substantial evidence. [Citation.] If it is, we affirm the order even if other evidence supports a contrary conclusion. [Citation.]” (*Id.* at p. 168.)

Here, the juvenile court’s removal order was supported by substantial evidence. It was undisputed Mother neglected her children’s welfare. She pled no contest to the charge that she “failed to obtain timely necessary medical treatment” for A.G.’s leg bruises and swelling and tenderness on her head. Moreover, she pled no contest to the charge that as a result of her neglect of A.G.’s earlier injuries she put both of her daughters at risk of serious physical harm.

In addition to the weight of the uncontested jurisdictional findings themselves, the juvenile court could further rely on medical evidence and Mother’s own statements to find Mother’s continued custody of her daughters posed a risk to her children’s safety. Dr. Feifer concluded the imaging studies of A.G.’s brain revealed injuries that could have been sustained anywhere from one day to two weeks before A.G.’s hospitalization. Mother was also initially untruthful with the Department about who had access to A.G. in the days immediately preceding her hospitalization: she failed to disclose during her first interview that two different men, neither of whom were related to A.G., had

stayed overnight at her home in the days prior to A.G.'s hospitalization—one of whom was present the very evening before. Mother also failed to provide an explanation to the Department's social worker for why she continued to have Babysitter care for her children even after, as she contended, A.G. had been injured while in Babysitter's care.

In light of Mother's no contest plea and the evidence before the juvenile court, the removal orders were supported by substantial evidence.

DISPOSITION

The juvenile court's orders are affirmed.

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BAKER, J.

We concur:

RUBIN, P. J.

KIM, J.